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Case 07-12384 Filed 07/11/07 Entered 07/11/07 16:46:44 Desc Main Doc 1 (Official Form 1) (04/07)Document Page 1 of 42 **United States Bankruptcy Court** Voluntary Petition **Northern District of Illinois** Name of Debtor (if individual, enter Last, First, Middle): Name of Joint Debtor (Spouse) (Last, First, Middle): Phillips, Jessica All Other Names used by the Debtor in the last 8 years All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): (include married, maiden, and trade names): Jessica Smith Last four digits of Soc. Sec. No./Complete EIN or other Tax I.D. No. (if more Last four digits of Soc. Sec. No./Complete EIN or other Tax I.D. No. (if more than one, state all): 0210 than one, state all): Street Address of Debtor (No. & Street, City, State & Zip Code): Street Address of Joint Debtor (No. & Street, City, State & Zip Code): 1515 N Silver Lane #2b Palatine, IL **ZIPCODE 60074** ZIPCODE County of Residence or of the Principal Place of Business: County of Residence or of the Principal Place of Business: Cook Mailing Address of Debtor (if different from street address) Mailing Address of Joint Debtor (if different from street address): ZIPCODE ZIPCODE Location of Principal Assets of Business Debtor (if different from street address above): ZIPCODE Chapter of Bankruptcy Code Under Which Type of Debtor **Nature of Business** (Form of Organization) (Check **one** box.) the Petition is Filed (Check one box.) (Check one box.) **✓** Chapter 7 Chapter 15 Petition for Health Care Business ✓ Individual (includes Joint Debtors) Single Asset Real Estate as defined in 11 Chapter 9 Recognition of a Foreign U.S.C. § 101(51B) See Exhibit D on page 2 of this form. Chapter 11 Main Proceeding Corporation (includes LLC and LLP) Railroad Chapter 12 Chapter 15 Petition for Stockbroker
Commodity Broker Partnership Chapter 13 Recognition of a Foreign Other (If debtor is not one of the above entities, Nonmain Proceeding check this box and state type of entity below.) Clearing Bank **Nature of Debts** Other (Check one box) ✓ Debts are primarily consumer Debts are primarily Tax-Exempt Entity debts, defined in 11 U.S.C. business debts. § 101(8) as "incurred by an (Check box, if applicable.) Debtor is a tax-exempt organization under individual primarily for a personal, family, or house-Title 26 of the United States Code (the Internal Revenue Code). hold purpose." Filing Fee (Check one box) Chapter 11 Debtors: Check one box: Full Filing Fee attached Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Filing Fee to be paid in installments (Applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form Debtor's aggregate noncontingent liquidated debts owed to non-insiders or affiliates are less than \$2,190,000. Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must Check all applicable boxes: attach signed application for the court's consideration. See Official Form 3B. ☐ A plan is being filed with this petition
☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b). Statistical/Administrative Information THIS SPACE IS FOR COURT USE ONLY Debtor estimates that funds will be available for distribution to unsecured creditors. Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors. Estimated Number of Creditors 50-100-1,000-5,001-10,001-25,001-50,001-200-1-Over 49 99 199 999 5,000 10,000 25,000 50,000 100,000 100,000  $\checkmark$ П Estimated Assets

\$10,000

Estimated Liabilities

\$0 to

**▼** \$0 to

\$10,000 to

\$100,000

\$50,000 to

\$100,000

\$100,000 to

\$1 million

\$100,000 to

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\$100 million

More than

More than

\$100 million

\$100 million

of the petition.

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FORM B1, Page 3 Page 3 of 42

## Voluntary Petition

(This page must be completed and filed in every case)

## **Signatures**

#### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United State Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Jessica Phillips

Signature of Debtor

Jessica Phillips

Х

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

July 11, 2007

## Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

Name of Debtor(s):

Phillips, Jessica

- ☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.
- Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

X

Printed Name of Foreign Representative

Date

#### Signature of Attorney

## X /s/ Nicolette L Robovsky

Signature of Attorney for Debtor(s)

#### Nicolette L Robovsky 6278336

Printed Name of Attorney for Debtor(s)

#### Gleason And Gleason LLC

Firm Name

#### 77 W Washington, Ste 1218

Chicago, IL 60602

#### (312) 578-9530

Telephone Number

July 11, 2007

Date

#### **Signature of Non-Attorney Petition Preparer**

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19B is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

#### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Х

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Χ

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.

Case 07-12384 Official Form 1, Exhibit D (10/06)

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Page 4 of 42 Document **United States Bankruptcy Court** 

Northern District of Illinois

| IN RE:            |           | Case No.  |
|-------------------|-----------|-----------|
| Phillips, Jessica |           | Chapter 7 |
| •                 | Debtor(s) | 1         |

## EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by

| the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.  |
|---|
| 2. Within the 180 days <b>before the filing of my bankruptcy case</b> , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. <i>You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.</i> |
| 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five  |

days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.]

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

| 4. I am not required to receive a credit counseling briefing because of: [Che motion for determination by the court.]  | ck the applicable statement.] [Must be accompanied by a    |
|--|--|
| Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of realizing and making rational decisions with respect to financial respect to financia | •  |
| Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired participate in a credit counseling briefing in person, by telephone, or the   |  |
| Active military duty in a military combat zone.  |  |
| 5. The United States trustee or bankruptcy administrator has determined that does not apply in this district.  | at the credit counseling requirement of 11 U.S.C. § 109(h) |

I certify under penalty of perjury that the information provided above is true and correct.

| Signature of Debtor: | /s/ Jessica Phillips |  |
|----------------------|----------------------|--|
| •                    | -                    |  |

Date: July 11, 2007

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Case 07-12384 Official Form 6 - Summary (10/06)

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Document Page 5 of 42 United States Bankruptcy Court

**Northern District of Illinois** 

| IN RE:            |         | Case No   |
|-------------------|---------|-----------|
| Phillips, Jessica |         | Chapter 7 |
| <u> </u>          | D.1: () | •         |

Debtor(s)

#### **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE   | ATTACHED<br>(YES/NO) | NUMBER OF<br>SHEETS | ASSETS      | LIABILITIES  | OTHER     |
|--|----------------------|---------------------|-------------|--------------|-----------|
| A - Real Property  | Yes                  | 1                   | \$ 0.00     |              |           |
| B - Personal Property  | Yes                  | 2                   | \$ 9,450.00 |              |           |
| C - Property Claimed as Exempt   | Yes                  | 1                   |             |              |           |
| D - Creditors Holding Secured Claims   | Yes                  | 1                   |             | \$ 0.00      |           |
| E - Creditors Holding Unsecured Priority<br>Claims (Total of Claims on Schedule E) | Yes                  | 1                   |             | \$ 0.00      |           |
| F - Creditors Holding Unsecured<br>Nonpriority Claims                              | Yes                  | 12                  |             | \$ 46,604.52 |           |
| G - Executory Contracts and Unexpired<br>Leases                                    | Yes                  | 1                   |             |              |           |
| H - Codebtors  | Yes                  | 1                   |             |              |           |
| I - Current Income of Individual Debtor(s)   | Yes                  | 1                   |             |              | \$ 785.33 |
| J - Current Expenditures of Individual Debtor(s)                                   | Yes                  | 1                   |             |              | \$ 820.00 |
|  | TOTAL                | 22                  | \$ 9,450.00 | \$ 46,604.52 |           |

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Case 07-12384 Doc 1 Official Form 6 - Statistical Summary (10/06)

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| IN RE:            |           | Case No   |
|-------------------|-----------|-----------|
| Phillips, Jessica |           | Chapter 7 |
| •                 | Debtor(s) | •         |

## STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability   | Amount         |
|---|----------------|
| Domestic Support Obligations (from Schedule E)  | \$<br>0.00     |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) (whether disputed or undisputed) | \$<br>0.00     |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E)                          | \$<br>0.00     |
| Student Loan Obligations (from Schedule F)  | \$<br>3,317.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E           | \$<br>0.00     |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)                   | \$<br>0.00     |
| TOTAL   | \$<br>3,317.00 |

#### **State the following:**

| Average Income (from Schedule I, Line 16)   | \$<br>785.33 |
|---|--------------|
| Average Expenses (from Schedule J, Line 18)   | \$<br>820.00 |
| Current Monthly Income (from Form 22A Line 12; <b>OR</b> , Form 22B Line 11; <b>OR</b> , Form 22C |              |
| Line 20)  | \$<br>970.67 |

#### **State the following:**

| 1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column               |            | \$<br>0.00      |
|--|------------|-----------------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.            | \$<br>0.00 |                 |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column |            | \$<br>0.00      |
| 4. Total from Schedule F   |            | \$<br>46,604.52 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4)               |            | \$<br>46,604.52 |

## Case 07-12384 Doc 1

IN RE:

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Signature of Attorney

Name of Law Firm

Case No.

Filed 07/11/07 Entered 07/11/07 16:46:44 Desc Main Document Page 7 of 42 United States Bankruptcy Court Northern District of Illinois

| Pł | illips, Jessica Chapter 7   |
|----|---|
|    | Debtor(s)   |
|    | DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR   |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:  |
|    | For legal services, I have agreed to accept   |
|    | Prior to the filing of this statement I have received   |
|    | Balance Due   |
| 2. | The source of the compensation paid to me was: Debtor Other (specify):  |
| 3. | The source of compensation to be paid to me is:  Debtor  Other (specify):   |
| 4. | I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.  |
|    | I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement ogether with a list of the names of the people sharing in the compensation, is attached.   |
| 5. | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:   |
|    | <ul> <li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;</li> <li>b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;</li> <li>c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;</li> <li>d. Representation of the debtor in adversary proceedings and other contested bankruptey matters;</li> </ul> |
| 6. | By agreement with the debtor(s), the above disclosed fee does not include the following services:  Litigation/Adversary Proceedings  Motions to Redeem \$400.00  Credit Education Fees  |
| _  |   |
|    | CERTIFICATION certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy receeding.  |
|    | July 11, 2007 /s/ Nicolette L Robovsky  |

**Gleason And Gleason LLC** 

Date

## NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

## Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

## Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

- 1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in instalments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them,

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using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

## 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

## Certificate of [Non-Attorney] Bankruptcy Petition Preparer

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor this notice required by  $\S 342(b)$  of the Bankruptcy Code.

| Printed Name and title, if any, of Bankruptcy Petition Preparer Address:  | Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, |
|---|--|
| X   | principal, responsible person, or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)                     |
| Signature of Bankruptcy Petition Preparer of officer, principal, responsible person, or partner whose Social Security number is provided above. | _  |
| Certificate of the Debtor   |  |

I (We), the debtor(s), affirm that I (we) have received and read this notice.

| Phillips, Jessica            | X /s/ Jessica Phillips             | 7/11/2007 |
|------------------------------|------------------------------------|-----------|
| Printed Name(s) of Debtor(s) | Signature of Debtor                | Date      |
| Case No. (if known)          | X                                  |           |
|                              | Signature of Joint Debtor (if any) | Date      |

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IN RE Phillips, Jessica

Debtor(s)

#### **SCHEDULE A - REAL PROPERTY**

Case No.

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H" for Husband, "W" for Wife, "J" for Joint or "C" for Community in the column labeled "HWJC." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| DESCRIPTION AND LOCATION OF PROPERTY | NATURE OF DEBTOR'S<br>INTEREST IN PROPERTY | H<br>W<br>J<br>C | CURRENT VALUE OF<br>DEBTOR'S INTEREST IN<br>PROPERTY WITHOUT<br>DEDUCTING ANY<br>SECURED CLAIM OR<br>EXEMPTION | AMOUNT OF SECURED<br>CLAIM |
|--------------------------------------|--|------------------|--|----------------------------|
| None                                 |  |                  |  |                            |
|                                      |  |                  |  |                            |
|                                      |  |                  |  |                            |
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(Report also on Summary of Schedules)

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Case No.

IN RE Phillips, Jessica

Debtor(s)

#### **SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H" for Husband, "W" for Wife, "J" for Joint, or "C" for Community in the column labeled "HWJC." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." In providing the information requested in this schedule, do not include the name or address of a minor child. Simply state "a minor child."

| 1. Cash on hand. 2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. 3. Security deposits with public utilities, | 100.00<br>100.00 |
|---|------------------|
| 3. Security deposits with public utilities.   |                  |
| telephone companies, landlords, and others.   | 4 500 00         |
| 4. Household goods and furnishings, include audio, video, and computer equipment.  Normal and necessary household goods, including but not limited to: TV, chairs, sofas, tables, bedroom furniture, some kitchen appliances, costume jewelry less than \$500 each piece                  | 1,500.00         |
| 5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.  Misc books pictures and music  | 50.00            |
| 6. Wearing apparel. Clothing  | 200.00           |
| 7. Furs and jewelry.  |                  |
| 8. Firearms and sports, photographic, and other hobby equipment.  |                  |
| 9. Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.   |                  |
| 10. Annuities. Itemize and name each issue.   |                  |
| 11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1).  Give particulars. (File separately the record(s) of any such interest(3). 11 U.S.C. § 521(c); Rule 1007(b)).                          |                  |
| 12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans.  Itemize.   |                  |
| 13. Stock and interests in incorporated and unincorporated businesses.  Itemize.  |                  |
| 14. Interests in partnerships or joint ventures. Itemize.   |                  |
| 15. Government and corporate bonds and other negotiable and non-negotiable instruments.   |                  |
| 16. Accounts receivable.  |                  |

IN RE Phillips, Jessica

Debtor(s)

# SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

\_\_ Case No. \_\_\_\_\_

|     | TYPE OF PROPERTY  | N<br>O<br>N<br>E | DESCRIPTION AND LOCATION OF PROPERTY  | H<br>W<br>J<br>C | CURRENT VALUE OF<br>DEBTOR'S INTEREST IN<br>PROPERTY WITHOUT<br>DEDUCTING ANY<br>SECURED CLAIM OR<br>EXEMPTION |
|-----|---|------------------|---|------------------|--|
| 17. | Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.  |                  | Child support from Miguel Moctezuma. (Debtor's doesn't expect to get money from this) |                  | 7,500.00   |
| 18. | Other liquidated debts owing debtor including tax refunds. Give particulars.  | X                |   |                  |  |
| 19. | Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property.  | X                |   |                  |  |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.  | X                |   |                  |  |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.  | X                |   |                  |  |
| 22. | Patents, copyrights, and other intellectual property. Give particulars.   | X                |   |                  |  |
| 23. | Licenses, franchises, and other general intangibles. Give particulars.  | X                |   |                  |  |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) in customer lists or similar compilations provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X                |   |                  |  |
| 25. | Automobiles, trucks, trailers, and other vehicles and accessories.  | X                |   |                  |  |
| 26. | Boats, motors, and accessories.   | X                |   |                  |  |
| 27. | Aircraft and accessories.   | X                |   |                  |  |
| 28. | Office equipment, furnishings, and supplies.  | X                |   |                  |  |
| 29. | Machinery, fixtures, equipment, and supplies used in business.  | X                |   |                  |  |
| 30. | Inventory.  | X                |   |                  |  |
| 31. | Animals.  | X                |   |                  |  |
| 32. | Crops - growing or harvested. Give particulars.   | X                |   |                  |  |
| 33. | Farming equipment and implements.   | X                |   |                  |  |
| 34. | Farm supplies, chemicals, and feed.   | X                |   |                  |  |
| 35. | Other personal property of any kind not already listed. Itemize.  | X                |   |                  |  |
|     |   |                  |   |                  |  |
|     |   |                  | TOT   | ΆL               | 9,450.00   |

| Case 07-1238             |
|--------------------------|
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| IN RE Phillips, Jessica  |

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Debtor(s)

## SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

| Debtor elects the exemptions to which debtor is entitled under: |  |
|---|--|
| (Check one box)   |  |

 $\$  Check if debtor claims a homestead exemption that exceeds \$136,875.

\_ Case No. \_\_

11 U.S.C. § 522(b)(2) 11 U.S.C. § 522(b)(3)

|   | T                                    |                               |  |
|---|--------------------------------------|-------------------------------|--|
| DESCRIPTION OF PROPERTY   | SPECIFY LAW PROVIDING EACH EXEMPTION | VALUE OF CLAIMED<br>EXEMPTION | CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS |
| SCHEDULE B - PERSONAL PROPERTY  |                                      |                               |  |
| Cash on hand  | 735 ILCS 5 §12-1001(b)               | 100.00                        | 100.00   |
| Checking account w/ HSBC  | 735 ILCS 5 §12-1001(b)               | 100.00                        | 100.00   |
| Normal and necessary household goods, including but not limited to: TV, chairs, sofas, tables, bedroom furniture, some kitchen appliances, costume jewelry less than \$500 each piece | 735 ILCS 5 §12-1001(b)               | 1,500.00                      | 1,500.00   |
| Misc books pictures and music   | 735 ILCS 5 §12-1001(a)               | 50.00                         | 50.00  |
| Clothing  | 735 ILCS 5 §12-1001(a)               | 200.00                        | 200.00   |
| Child support from Miguel Moctezuma. (Debtor's doesn't expect to get money from this)   | 735 ILCS 5 §12-1001(g)(4)            | 7,500.00                      | 7,500.00   |
|   |                                      |                               |  |
|   |                                      |                               |  |
|   |                                      |                               |  |
|   |                                      |                               |  |

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IN RE Phillips, Jessica

Debtor(s)

## SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

☑ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS<br>INCLUDING ZIP CODE AND ACCOUNT NUMBER.<br>(See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED,<br>NATURE OF LIEN, AND DESCRIPTION AND VALUE OF<br>PROPERTY SUBJECT TO LIEN | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF<br>CLAIM WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION, IF ANY |
|--|----------|---------------------------------------|--|------------|--------------|----------|---|------------------------------|
| ACCOUNT NO.  |          |                                       |  |            |              |          |   |                              |
|  |          |                                       |  |            |              |          |   |                              |
|  |          |                                       |  |            |              |          |   |                              |
|  |          |                                       | VALUE &  |            |              |          |   |                              |
| ACCOUNT NO.  |          |                                       | VALUE \$   |            |              |          |   |                              |
| ACCOUNT NO.  |          |                                       |  |            |              |          |   |                              |
|  |          |                                       |  |            |              |          |   |                              |
|  |          |                                       |  |            |              |          |   |                              |
|  |          |                                       | VALUE \$   |            |              |          |   |                              |
| ACCOUNT NO.  |          |                                       |  |            |              |          |   |                              |
|  |          |                                       |  |            |              |          |   |                              |
|  |          |                                       |  |            |              |          |   |                              |
|  |          |                                       |  | -          |              |          |   |                              |
|  |          |                                       | VALUE \$   | $\vdash$   |              |          |   |                              |
| ACCOUNT NO.  |          |                                       |  |            |              |          |   |                              |
|  |          |                                       |  |            |              |          |   |                              |
|  |          |                                       |  |            |              |          |   |                              |
|  |          |                                       | VALUE \$   | 1          |              |          |   |                              |
|  |          |                                       |  | Sub        |              |          |   | _                            |
| continuation sheets attached   |          |                                       | (Total of th   |            |              |          | \$  | \$                           |
|  |          | (U                                    | se only on last page of the completed Schedule D. Report   | als        | Fot<br>so c  | n        |   |                              |
|  |          |                                       | the Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Relate        | tatis      | stic         | al       | \$  | \$                           |

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Case No.

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IN RE Phillips, Jessica

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Debtor(s)

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case under chapter 7 or 13 report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case under chapter 7 report this total also on the Statistical Summary of Certain Liabilities and Related Data. Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) **Domestic Support Obligations** Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3). Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$5,400\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). Deposits by individuals Claims of individuals up to \$2,425\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). Commitments to Maintain the Capital of an Insured Depository Institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9). Claims for Death or Personal Injury While Debtor Was Intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10). \* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment. • continuation sheets attached

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IN RE Phillips, Jessica

Debtor(s)

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts filing a case under chapter 7, report this total also on the Statistical Summary of Certain Liabilities and

| Check this box if debtor has no creditors holdi  | ng       | unse                                  | cured nonpriority claims to report on this Schedule F.   |             |              |          |                       |
|--|----------|---------------------------------------|--|-------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)       | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE   | CONTINGENT  | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
| ACCOUNT NO. <b>8031478524,8032960386,804</b>   |          |                                       | Collections for Medical/Dental bills. Open   |             |              |          |                       |
| Acute Care Specialists<br>701 Winthrop Ave<br>Glendale Heights, IL 60139-1405                            |          |                                       | account opened 5/03  |             |              |          | 1,791.0               |
| ACCOUNT NO.  | T        |                                       | Assignee or other notification for:  |             |              |          | 1,10110               |
| Merchant's Credit Guide Co.<br>Executive Office<br>223 W Jackson Blvd, Ste 900<br>Chicago, IL 60606-6908 | -        |                                       | Acute Care Specialists   |             |              |          |                       |
| ACCOUNT NO. <b>51400002097099</b>  |          |                                       | Open account opened 4/03   |             |              |          |                       |
| Alexian Brothers Hospital<br>800 Biesterfield Rd<br>Elk Grove Village, IL 60007-3311                     |          |                                       |  |             |              |          | 743.0                 |
| ACCOUNT NO.  | Т        |                                       | Assignee or other notification for:  |             |              |          | 1 1010                |
| Malcom S Gerald And Associates, Inc.<br>332 S Michigan Ave Ste 600<br>Chicago, IL 60604-4434             | -        |                                       | Alexian Brothers Hospital  |             |              |          |                       |
| 11 continuation sheets attached  |          | I .                                   | (Total of th   | •           | age          | ?)       | \$ 2,534.00           |
|  |          |                                       | (Use only on last page of the completed Schedule F. Report the Summary of Schedules and, if applicable, on the Summary of Certain Liabilities and Relate | als<br>atis | tica         | n<br>al  | \$                    |

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IN RE Phillips, Jessica

Debtor(s)

|  |          | (1                                    | Continuation Sneet)   |                              |                    |                     |                       |
|--|----------|---------------------------------------|---|------------------------------|--------------------|---------------------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br>(See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE  | CONTINGENT                   | UNLIQUIDATED       | DISPUTED            | AMOUNT<br>OF<br>CLAIM |
| ACCOUNT NO. <b>8519766938</b>  |          |                                       | Open account opened 8/06  | T                            |                    |                     |                       |
| Aspire PO Box 105555 Atlanta, GA 30348-5555  |          |                                       |   |                              |                    |                     | 887.00                |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:   | $\vdash$                     |                    |                     | 331133                |
| Midland Credit Management<br>8875 Aero Dr Ste 200<br>San Diego, CA 92123-2255                            |          |                                       | Aspire  |                              |                    |                     |                       |
| ACCOUNT NO. <b>13023416</b>  |          |                                       | Open account opened 3/05  |                              |                    |                     |                       |
| At&T<br>PO Box 8212<br>Aurora, IL 60572-8212   |          |                                       |   |                              |                    |                     | 1,332.00              |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:   |                              |                    |                     | 1,002.00              |
| West Asset<br>1000 N Travis St Ste F<br>Sherman, TX 75090-5054   |          |                                       | At&T  |                              |                    |                     |                       |
| ACCOUNT NO. <b>765078210</b>   |          |                                       | Open account opened 9/02  | -                            |                    |                     |                       |
| At&T Broadband<br>PO Box 173885<br>Denver, CO 80217-3885   |          |                                       |   |                              |                    |                     | 394.00                |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:   | +                            |                    |                     | 394.00                |
| Credit Protection Assoc<br>13355 Noel Rd Ste 2100<br>Dallas, TX 75240-6837                               |          |                                       | At&T Broadband  |                              |                    |                     |                       |
| ACCOUNT NO. <b>5127-3700-0028-6066</b>   |          |                                       | Revolving credit card charges incurred over the   | -                            |                    |                     |                       |
| Bankcard Services PO Box 4499 Beaverton, OR 97076-4499   |          |                                       | past several years.   |                              |                    |                     | 274.60                |
| Sheet no. 1 of 11 continuation sheets attached to  | 1        | <u> </u>                              |   | <br>Sub                      | tota               | lal                 | 271.00                |
| Schedule of Creditors Holding Unsecured Nonpriority Claims   |          |                                       | (Use only on last page of the completed Schedule F. Repor<br>the Summary of Schedules, and if applicable, on the S<br>Summary of Certain Liabilities and Relate | nis p<br>T<br>t als<br>tatis | age<br>Fota<br>o o | e)<br>al<br>n<br>al | \$ <b>2,884.00</b>    |

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IN RE Phillips, Jessica

\_ Case No. \_\_

Debtor(s)

|  |          |                                       | Continuation Sheet)   |            |                      |          |                       |
|--|----------|---------------------------------------|---|------------|----------------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br>(See Instructions Above.)     | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE  | CONTINGENT | UNLIQUIDATED         | DISPUTED | AMOUNT<br>OF<br>CLAIM |
| ACCOUNT NO. <b>t060421, 239909</b>   |          |                                       | Medical/Dental bill   | T          |                      | H        |                       |
| Carol Stream Fire Protection PO Box 457 Wheeling, IL 60090-0457  | -        |                                       |   |            |                      |          | 465.00                |
| ACCOUNT NO. <b>191827</b>  |          |                                       | Open account opened 2/06  | $\vdash$   |                      | H        |                       |
| Centegra Health 504 Northwest Hwy Cary, IL 60013-2995  |          |                                       |   |            |                      |          | 325.00                |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:   | ╁          |                      | H        | 323.00                |
| Aams Llc<br>4800 Mills Civic Pkwy<br>West Des Moines, IA 50265-5263  |          |                                       | Centegra Health   |            |                      |          |                       |
| ACCOUNT NO.  |          |                                       | Medical/Dental bill   |            |                      |          |                       |
| Central Dupage Hospital<br>25 N Winfield Rd<br>Winfield, IL 60190  |          |                                       |   |            |                      |          |                       |
| ACCOUNT NO. <b>27923831</b>  |          |                                       | Open account opened 9/06  | -          |                      |          | 500.00                |
| Charter One Bank<br>1215 Superior Ave E<br>Cleveland, OH 44114-3257  |          |                                       |   |            |                      |          | 4 047 00              |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:   |            |                      |          | 1,617.00              |
| Asset Acceptance<br>PO Box 2036<br>Warren, MI 48090-2036   |          |                                       | Charter One Bank  |            |                      |          |                       |
| ACCOUNT NO. <b>685424584</b>   |          |                                       | consumer debt   |            |                      |          |                       |
| Children's Bomc<br>Customer Service Center<br>Camp Hill, PA 17012-0001                                       |          |                                       |   |            |                      |          |                       |
| Sheet no. 2 of 11 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          |                                       | (Total of th  | Sub        |                      |          | \$ 2,956.77           |
| Zenerale of Creators froming ensecured (vonpriority Claims   |          |                                       | (Use only on last page of the completed Schedule F. Repor<br>the Summary of Schedules, and if applicable, on the S<br>Summary of Certain Liabilities and Relate | t als      | Fota<br>o o<br>stica | al<br>n  |                       |

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\_ Case No. \_\_

IN RE Phillips, Jessica

Debtor(s)

|  |          | (•                                    | Continuation Sheet)  |                              |                             |                       |                       |
|--|----------|---------------------------------------|--|------------------------------|-----------------------------|-----------------------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br>(See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE   | CONTINGENT                   | UNLIQUIDATED                | DISPUTED              | AMOUNT<br>OF<br>CLAIM |
| ACCOUNT NO. <b>D386774n1</b>   |          |                                       | Open account opened 12/05  | H                            |                             | H                     |                       |
| Cingular Wireless<br>5050 Ash Grove Dr<br>Springfield, IL 62711-6329                                     |          |                                       |  |                              |                             |                       | 215.00                |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:  |                              |                             | H                     | 215.00                |
| First Nationwide - Delta 3760 Calle Tecate Camarillo, CA 93012-5059                                      |          |                                       | Cingular Wireless  |                              |                             |                       |                       |
| ACCOUNT NO. <b>658653780</b>   |          |                                       | Open account opened 1/06   |                              |                             |                       |                       |
| Com Ed Exelon<br>Bankruptcy<br>2100 Swift Dr<br>Oak Brook, IL 60523-1559                                 |          |                                       |  |                              |                             |                       | 223.00                |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:  |                              |                             |                       |                       |
| NCO<br>World Headquarters<br>507 Prudential Rd<br>Horsham, PA 19044-2308                                 |          |                                       | Com Ed Exelon  |                              |                             |                       |                       |
| ACCOUNT NO.  |          |                                       | tickets  |                              |                             |                       |                       |
| Dupage County Clerk<br>Tickets<br>1000 31st St<br>Downers Grove, IL 60515-1214                           |          |                                       |  |                              |                             |                       | 3 000 00              |
| ACCOUNT NO. 17419  |          |                                       | Open account opened 5/02   |                              |                             | $\forall$             | 3,000.00              |
| Elmhurst Emergency Medical Center<br>200 Berteau Ave<br>Elmhurst, IL 60126-2966                          |          |                                       | •  |                              |                             |                       |                       |
| AGGOLIVENO   |          |                                       | Assignee or other notification for:  |                              |                             | $\dashv$              | 404.00                |
| ACCOUNT NO.  Van Ru Credit Corp 10024 Skokie Blvd Ste 2 Skokie, IL 60077-1025                            |          |                                       | Elmhurst Emergency Medical Center  |                              |                             |                       |                       |
| Sheet no. 3 of 11 continuation sheets attached to  |          |                                       |  | <br>Sub                      | tota                        | ıl                    |                       |
| Schedule of Creditors Holding Unsecured Nonpriority Claims   |          |                                       | (Total of the (Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Relate | nis p<br>T<br>t als<br>tatis | age<br>Fota<br>o o<br>stica | e)  <br>al<br>n<br>al | \$ 3,842.00<br>\$     |

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IN RE Phillips, Jessica

\_ Case No. \_\_

Debtor(s)

|   |          | ((                                    | Continuation Sheet)   |                |              |          |                       |
|---|----------|---------------------------------------|---|----------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)        | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE  | CONTINGENT     | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
| ACCOUNT NO. <b>E00000386778,e0000183859</b>   |          |                                       | Collections for Medical/Dental bills. Open  |                |              | Н        |                       |
| Elmhurst Memorial Hospital PO Box 92348 Chicago, IL 60675-2348  |          |                                       | account opened 10/03  |                |              |          | 420.00                |
| ACCOUNT NO.   |          |                                       | Assignee or other notification for:   |                |              | Н        | 130.00                |
| Van Ru Credit Corp<br>10024 Skokie Blvd Ste 2<br>Skokie, IL 60077-1025                                    |          |                                       | Elmhurst Memorial Hospital  |                |              |          |                       |
| ACCOUNT NO. <b>1436903</b>  |          |                                       | Installment account opened 1/03   |                |              | Н        |                       |
| Emergency & Ambulatory<br>33 W Higgins Rd Ste 4040<br>South Barrington, IL 60010-9355                     |          |                                       |   |                |              |          | 325.00                |
| ACCOUNT NO.   |          |                                       | Assignee or other notification for:   |                |              | Н        | 323.00                |
| Medical Collection Systems<br>725 S Wells St Ste 700<br>Chicago, IL 60607-4578                            |          |                                       | Emergency & Ambulatory  |                |              |          |                       |
| ACCOUNT NO. 805r0101969151016   |          |                                       | Open account opened 3/05  |                |              | Н        |                       |
| Fingerhut<br>PO Box 1250<br>Saint Cloud, MN 56395-1250  |          |                                       |   |                |              |          | 271.00                |
| ACCOUNT NO.   |          |                                       | Assignee or other notification for:   | +              |              | Н        | 271.00                |
| RJM ACQ LLC<br>575 Underhill Blvd Ste 224<br>Syosset, NY 11791-3416                                       |          |                                       | Fingerhut   |                |              |          |                       |
| ACCOUNT NO. <b>5126-0700-0023-3347</b>  |          |                                       | Revolving account opened 7/06   |                |              | Н        |                       |
| First Bk Of De/contine<br>1000 Rocky Run Pkwy<br>Wilmington, DE 19803-1455                                |          |                                       |   |                |              |          |                       |
|   |          |                                       |   |                |              | Ц        | 658.00                |
| Sheet no4 of11 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          |                                       | (Total of the   | Sub<br>nis p   |              |          | \$ 1,384.00           |
|   |          |                                       | (Use only on last page of the completed Schedule F. Repor<br>the Summary of Schedules, and if applicable, on the S<br>Summary of Certain Liabilities and Relate | t als<br>tatis | tica         | n<br>al  | \$                    |

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\_ Case No. \_\_

IN RE Phillips, Jessica

Debtor(s)

|  |          | (                                     | Continuation Sheet)  |                              |                    |                     |                       |
|--|----------|---------------------------------------|--|------------------------------|--------------------|---------------------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br>(See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE   | CONTINGENT                   | UNLIQUIDATED       | DISPUTED            | AMOUNT<br>OF<br>CLAIM |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:  |                              |                    | Н                   |                       |
| Continetal Finance Company PO Box 30034 Tampa, FL 33630-3034   |          |                                       | First Bk Of De/contine   |                              |                    |                     |                       |
| ACCOUNT NO.  |          |                                       | Medical/Dental bill  |                              |                    | Н                   |                       |
| Glen Oaks Hospital<br>121 E Roosevelt Rd<br>Lombard, IL 60148-4561                                       |          |                                       |  |                              |                    |                     | 500.00                |
| A GGOVINE NO. 047222   |          |                                       | Open account opened 6/04   | $\vdash$                     |                    | Н                   | 500.00                |
| ACCOUNT NO. 917322  Glenside Public Library 25 E Fullerton Ave Glendale Heights, IL 60139-2688           |          |                                       | open account opened oro-   |                              |                    |                     | 251.00                |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:  |                              |                    | H                   | 231.00                |
| Medshid Corp<br>PO Box 26390<br>Columbus, OH 43226-0390  |          |                                       | Glenside Public Library  |                              |                    |                     |                       |
| ACCOUNT NO. <b>9006105</b>   |          |                                       | Open account opened 12/04  |                              |                    | Н                   |                       |
| Harvard Collection For Elk Grove Lab Physicians 4839 N Elston Ave Chicago, IL 60630-2534                 |          |                                       |  |                              |                    |                     | 82.00                 |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:  |                              |                    | Н                   | 02.00                 |
| Elk Grove Lab Physicians P.c<br>Address Unknown  |          |                                       | Harvard Collection   |                              |                    |                     |                       |
| ACCOUNT NO. <b>250155</b>  | -        |                                       | Open account opened 6/03   |                              |                    | Н                   |                       |
| Hollywood Entertainment Corporation<br>PO Box 6789<br>Wilsonville, OR 97070-6089                         |          |                                       |  |                              |                    |                     |                       |
| Sheet no. 5 of 11 continuation sheets attached to  |          |                                       |  | <br>Sub                      | tota               | L<br>al             | 109.00                |
| Schedule of Creditors Holding Unsecured Nonpriority Claims   |          |                                       | (Total of the (Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Relate | iis p<br>T<br>t als<br>tatis | age<br>Fota<br>o o | e)<br>al<br>n<br>al | \$ <b>942.00</b>      |

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IN RE Phillips, Jessica

\_ Case No. \_\_\_

Debtor(s)

|   |          | (                                     | Continuation Sheet)   |                  |              |          |                       |
|---|----------|---------------------------------------|---|------------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)        | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE  | CONTINGENT       | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
| ACCOUNT NO.   |          |                                       | Assignee or other notification for:   | Н                |              |          |                       |
| Rskmgtcora<br>4450 River Green Pkwy<br>Duluth, GA 30096-2589  |          |                                       | Hollywood Entertainment Corporation   |                  |              |          |                       |
| ACCOUNT NO. <b>5182840002065199</b>   |          |                                       | Revolving account opened 10/06  |                  |              |          |                       |
| Imagine/fbofd<br>245 Perimeter Center Pk<br>Atlanta, GA 30346   |          |                                       |   |                  |              |          | 4 072 00              |
| ACCOUNT NO. <b>4755719</b> , <b>4756150</b>   |          |                                       | Collections. Open account opened 7/01   |                  |              |          | 1,073.00              |
| Jewel Food Stores<br>250 E Parkcenter Blvd<br>Boise, ID 83706-3940  |          |                                       |   |                  |              |          | 112.00                |
| ACCOUNT NO.   |          |                                       | Assignee or other notification for:   |                  |              |          | 112.00                |
| Harvard Collection Services<br>4839 N Elston Ave<br>Chicago, IL 60630-2534                                |          |                                       | Jewel Food Stores   |                  |              |          |                       |
| ACCOUNT NO. <b>031122627852</b>   |          |                                       | Revolving account opened 11/00  |                  |              |          |                       |
| Kohls<br>N56W17000 Ridgewood Dr<br>Menomonee Falls, WI 53051-5660   |          |                                       |   |                  |              |          | 394.00                |
| ACCOUNT NO.   |          |                                       | Assignee or other notification for:   |                  |              |          | 334.00                |
| NCO<br>World Headquarters<br>507 Prudential Rd<br>Horsham, PA 19044-2308                                  |          |                                       | Kohls   |                  |              |          |                       |
| ACCOUNT NO. <b>26452978</b>   |          |                                       | Installment account opened 2/01. Auto loan  |                  |              |          |                       |
| Mazda Amer<br>PO Box 680020/200 A<br>Franklin, TN 37068   |          |                                       | repossession/ surrender.  |                  |              |          |                       |
| Sheet no. 6 of 11 continuation sheets attached to   |          |                                       |   | C <sub>v-1</sub> | h.c.'        |          | 16,633.00             |
| Sheet no6 of11 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          |                                       | (Total of th  | •                | age          | ;)       | \$ 18,212.00          |
|   |          |                                       | (Use only on last page of the completed Schedule F. Repor<br>the Summary of Schedules, and if applicable, on the S<br>Summary of Certain Liabilities and Relate | t als<br>tatis   | tica         | n<br>al  | \$                    |

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\_ Case No. \_\_

IN RE Phillips, Jessica

Debtor(s)

|  |          | (                                     | Continuation Sheet)   |                  |              |          |                       |
|--|----------|---------------------------------------|---|------------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br>(See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE  | CONTINGENT       | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
| ACCOUNT NO. 4794612  |          |                                       | Open account opened 1/05  |                  |              |          |                       |
| MEA Elk Grove LLC<br>PO Box 366<br>Hinsdale, IL 60522-0366   |          |                                       | opon account opened inco  |                  |              |          | 642.00                |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:   | +                |              |          |                       |
| State Collection Service<br>2509 S Stoughton Rd<br>Madison, WI 53716-3314                                |          |                                       | MEA Elk Grove LLC   |                  |              |          |                       |
| ACCOUNT NO. 19813113   |          |                                       | Open account opened 1/04  | +                |              |          |                       |
| Nco- Medclr<br>For Moraine Emergency Physicians<br>PO Box 41448<br>Philadelphia, PA 19101-1448           |          |                                       |   |                  |              |          | 210.00                |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:   |                  |              |          |                       |
| Med1 02 Moraine Emergency Physicians<br>Address Unknown  |          |                                       | Nco- Medcir   |                  |              |          |                       |
| ACCOUNT NO. 10158413, 10158406  Nco-marlin For International Check Service                               | _        |                                       | Open account opened 1/02  |                  |              |          |                       |
| PO Box 8529<br>Philadelphia, PA 19101-8529   |          |                                       |   |                  |              |          | 044.00                |
| ACCOUNT NO. International Check Svc Address Unknown  |          |                                       | Assignee or other notification for: Nco-marlin  |                  |              |          | 214.00                |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:   |                  |              |          |                       |
| Nco Financial Systems PO Box 13570 Philadelphia, PA 19101-3570   |          |                                       | Nco-marlin  |                  |              |          |                       |
| Sheet no   |          | <u> </u>                              | (Total of   | Sub<br>this p    |              |          | \$ 1,066.00           |
|  |          |                                       | (Use only on last page of the completed Schedule F. Repo<br>the Summary of Schedules, and if applicable, on the<br>Summary of Certain Liabilities and Relat | rt als<br>Statis | stic         | on<br>al | \$                    |

IN RE Phillips, Jessica

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Debtor(s)

|  |          | (                                     | Continuation Sheet)  |                              |                    |                     |                       |
|--|----------|---------------------------------------|--|------------------------------|--------------------|---------------------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)               | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE                                       | CONTINGENT                   | UNLIQUIDATED       | DISPUTED            | AMOUNT<br>OF<br>CLAIM |
| ACCOUNT NO. <b>3040200298</b>  |          |                                       | Installment account opened 1/05  | T                            |                    |                     |                       |
| Northwest Collectors For Physician Anesthesia Associates 3601 Algonquin Rd Ste 23 Rolling Meadows, IL 60008-3126 | -        |                                       | <b>F</b>   |                              |                    |                     | 650.00                |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:  |                              |                    |                     |                       |
| Physician Anesthesia Associate<br>Address Unknown  |          |                                       | Northwest Collectors   |                              |                    |                     |                       |
| ACCOUNT NO.  |          |                                       | Medical/Dental bill  |                              |                    |                     |                       |
| Northwest Community Hospital<br>800 W Central Rd<br>Palatine, IL 60055-0001                                      |          |                                       |  |                              |                    |                     | 5 000 00              |
| ACCOUNT NO. <b>7339943</b>   |          |                                       | Open account opened 10/05  |                              |                    |                     | 5,000.00              |
| Northwest Radiology Associates<br>880 W Central Rd<br>Arlington Heights, IL 60005-2355                           |          |                                       |  |                              |                    |                     | 242.22                |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:  |                              |                    |                     | 242.00                |
| Kca Financial<br>628 North St<br>PO Box 53<br>Geneva, IL 60134-0053  |          |                                       | Northwest Radiology Associates   |                              |                    |                     |                       |
| ACCOUNT NO. 1435188361110010200  |          |                                       | Collections  | -                            |                    | H                   |                       |
| PAY PAL<br>PO Box 45950<br>Omaha, NE 68145-0950  |          |                                       |  |                              |                    |                     | 36.00                 |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:  |                              |                    | $\forall$           | 20.30                 |
| Eskanos & Adler<br>2325 Clayton Rd<br>Concord, CA 94520-2104   |          |                                       | PAY PAL  |                              |                    |                     |                       |
| Sheet no. 8 of 11 continuation sheets attached to  |          | I                                     | <u> </u>   | Sub                          | tota               | ıl l                |                       |
| Schedule of Creditors Holding Unsecured Nonpriority Claims   |          |                                       | (Total of the Completed Schedule F. Report the Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Relate | nis p<br>T<br>t als<br>tatis | age<br>Fota<br>o o | e)<br>al<br>n<br>al | \$ <b>5,928.00</b>    |

Official Form C 156 07 12384 Doc 1 Filed 07/11/07 Entered 07/11/07 16:46:44 Desc Main Page 25 of 42

\_ Case No. \_\_\_

IN RE Phillips, Jessica

Debtor(s)

|  |          | (                                     | Continuation Sheet)   |                |              |          |                       |
|--|----------|---------------------------------------|---|----------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)                 | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE  | CONTINGENT     | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
| ACCOUNT NO. <b>r7733764,pt0602203</b>  |          |                                       | Collections   | H              |              | $\dashv$ |                       |
| Professional Career Development Institut<br>C/O ER Solutions<br>PO Box 9004<br>Renton, WA 98057-9004               |          |                                       |   |                |              |          | 690.00                |
| ACCOUNT NO. 4006-1000-0156-2119  |          |                                       | Revolving credit card charges incurred over the   | T              |              | 1        |                       |
| Rewards 660<br>PO Box 30490<br>Tampa, FL 33630-3490  |          |                                       | past several years.   |                |              |          | 447.00                |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:   | $\vdash$       |              | +        | 447.00                |
| Tci<br>2104 W 41st St Ste 34<br>Sioux Falls, SD 57105-6116   |          |                                       | Rewards 660   |                |              |          |                       |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:   |                |              |          |                       |
| Total Card Inc<br>PO Box 89210<br>Sioux Falls, SD 57109-9210   |          |                                       | Rewards 660   |                |              |          |                       |
| ACCOUNT NO. <b>374929</b>  |          |                                       | Collections   |                |              |          |                       |
| Rio Resources<br>C/O United Legal Corporation<br>9000 Regency Square Blvd Ground FI<br>Jacksonville, FL 32211-8115 |          |                                       |   |                |              |          | 250.00                |
| ACCOUNT NO. 984296041710002  |          |                                       | Installment account opened 3/07. STUDENT  | H              |              | $\dashv$ | 200.00                |
| Sallie Mae Servicing<br>1002 Arthur Dr<br>Lynn Haven, FL 32444-1683  |          |                                       | LOANS   |                |              |          |                       |
| ACCOUNT NO 094206041740004   |          |                                       | Installment account opened 3/07. STUDENT  | Н              |              | +        | 2,004.00              |
| ACCOUNT NO. 984296041710001  Sallie Mae Servicing 1002 Arthur Dr Lynn Haven, FL 32444-1683                         |          |                                       | LOANS   |                |              |          |                       |
| Sheet no. 9 of 11 continuation sheets attached to  |          |                                       |   | C,-1           | to.          | +        | 1,313.00              |
| Sheet no. 9 of 11 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims       |          |                                       | (Total of the   | •              |              | ) [      | 4,704.00              |
|  |          |                                       | (Use only on last page of the completed Schedule F. Repor<br>the Summary of Schedules, and if applicable, on the S<br>Summary of Certain Liabilities and Relate | t als<br>tatis | o o<br>tica  | n<br>ıl  | \$                    |

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\_ Case No. \_\_\_

IN RE Phillips, Jessica

Debtor(s)

|  |          | (                                     | Continuation Sheet)   |                |              |          |                       |
|--|----------|---------------------------------------|---|----------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br>(See Instructions Above.)   | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE  | CONTINGENT     | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
| ACCOUNT NO. <b>06155182818,1016865102</b>  |          |                                       | Open account opened 1/07  |                |              | Н        |                       |
| Sprint Communications Co<br>6391 Sprint Pkwy<br>Overland Park, KS 66251-6100                               |          |                                       |   |                |              |          | 248.00                |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:   |                |              | Н        | 240.00                |
| Afni Inc<br>PO Box 3427<br>Bloomington, IL 61702-3427  |          |                                       | Sprint Communications Co  |                |              |          |                       |
| ACCOUNT NO. <b>268630417557</b>  |          |                                       | Open account opened 11/03   |                |              | Н        |                       |
| Suburban Radiologist<br>1446 Momentum PI<br>Chicago, IL 60689-5314   |          |                                       |   |                |              |          | 92.00                 |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:   |                |              | Н        | 92.00                 |
| Dependon Collection<br>7627 Lake St Ste 210<br>River Forest, IL 60305-1878                                 |          |                                       | Suburban Radiologist  |                |              |          |                       |
| ACCOUNT NO. 1876514533   |          |                                       | Open account opened 8/06  |                |              | Н        |                       |
| Tcf Bank<br>800 Burr Ridge Pkwy<br>Burr Ridge, IL 60527-6486   |          |                                       |   |                |              |          | 630.00                |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:   |                |              | H        | 000.00                |
| Heller & Frisone<br>33 N Lasalle St Ste 1200<br>Chicago, IL 60602-3415                                     |          |                                       | Tcf Bank  |                |              |          |                       |
| ACCOUNT NO. <b>108287101</b>   |          |                                       | Open account opened 5/05  |                |              | H        |                       |
| US Cellular<br>Write Off Team<br>5117 W Terrace Dr<br>Madison, WI 53718-8344                               |          |                                       |   |                |              |          |                       |
|  |          |                                       |   |                |              | Ц        | 350.00                |
| Sheet no10 of11 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          |                                       | (Total of the   | -              | age          | ;)       | \$ 1,320.00           |
|  |          |                                       | (Use only on last page of the completed Schedule F. Repor<br>the Summary of Schedules, and if applicable, on the S<br>Summary of Certain Liabilities and Relate | t als<br>tatis | tica         | n<br>al  | \$                    |

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IN RE Phillips, Jessica

\_ Case No. \_\_\_

Debtor(s)

|  |          | (                                     | Continuation Sheet)   |                  |              |          |                       |
|--|----------|---------------------------------------|---|------------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE  | CONTINGENT       | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:   |                  |              |          |                       |
| Acct Rec Svc<br>3031 N 114th St<br>Milwaukee, WI 53222-4208  |          |                                       | US Cellular   |                  |              |          |                       |
| ACCOUNT NO. <b>702388016</b> , <b>702813465</b>  |          |                                       | Open account opened 12/06   |                  |              |          |                       |
| US Cellular<br>Write Off Team<br>5117 W Terrace Dr<br>Madison, WI 53718-8344                       |          |                                       |   |                  |              |          | 799.00                |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:   |                  |              |          |                       |
| Portfolio Recoveries<br>287 Independence Blvd<br>Virginia Beach, VA 23462-2962                     |          |                                       | US Cellular   |                  |              |          |                       |
| ACCOUNT NO. dx3944   |          |                                       | nsf check   |                  |              |          |                       |
| Walgreens<br>200 Wilmot Rd<br>Deerfield, IL 60015-4620   |          |                                       |   |                  |              |          | 32.75                 |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:   | +                |              |          | 32.75                 |
| Chex Systems 7805 Hudson Rd Ste 100 Saint Paul, MN 55125-1595                                      | _        |                                       | Walgreens   |                  |              |          |                       |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:   | +                |              |          |                       |
| Credit Management Control<br>2707 Rapids Dr<br>Racine, WI 53404-1743                               |          |                                       | Walgreens   |                  |              |          |                       |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:   | +                | _            |          |                       |
| Telecheck<br>5251 Westheimer Rd<br>Houston, TX 77056-5412  |          |                                       | Walgreens   |                  |              |          |                       |
| Sheet no. 11 of 11 continuation sheets attached to   |          | <u> </u>                              | <u> </u>  | Sub              | tot          | al       |                       |
| Schedule of Creditors Holding Unsecured Nonpriority Claims   |          |                                       | (Total of t   | his p            |              | e)       | \$ 831.75             |
|  |          |                                       | (Use only on last page of the completed Schedule F. Repo<br>the Summary of Schedules, and if applicable, on the<br>Summary of Certain Liabilities and Relat | rt als<br>Statis | so o         | on<br>al | \$ 46,604.5 <b>2</b>  |

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IN RE Phillips, Jessica

Debtor(s)

## SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Case No.

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R. Bankr. P. 1007(m).

✓ Check this box if debtor has no executory contracts or unexpired leases.

|   | DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST.  |
|---|--|
| NAME AND MAILING ADDRESS, INCLUDING ZIP CODE<br>OF OTHER PARTIES TO LEASE OR CONTRACT | STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT. |
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IN RE Phillips, Jessica

Debtor(s)

#### **SCHEDULE H - CODEBTORS**

Case No.

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

| NAME AND ADDRESS OF CODEBTOR | NAME AND ADDRESS OF CREDITOR |
|------------------------------|------------------------------|
|                              |                              |
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Debtor(s)

## SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child.

| Debtor's Marital Status DEPENDENTS OF DEBTO                                      |                     |   | F DEBTOR ANI  | ND SPOUSE      |                         |                |         |
|--|---------------------|---|---------------|----------------|-------------------------|----------------|---------|
| Single   |                     | RELATIONSHIP(S): Dependent  |               |                | AGE(S):<br><b>1</b>     |                |         |
|  |                     |   |               |                |                         |                |         |
| EMPLOYMENT:  |                     | DEBTOR  |               |                | SPOUSE                  |                |         |
| Occupation Front Desk Name of Employer How long employed Address of Employer     |                     |   |               |                |                         |                |         |
|  | Palatine, IL        |   |               |                |                         |                |         |
|  | gross wages, sa     | r projected monthly income at time case filed) lary, and commissions (prorate if not paid mon | nthly)        | \$<br>\$       | DEBTOR<br><b>970.67</b> | \$<br>\$       | SPOUSE  |
| 3. SUBTOTAL  |                     |   |               | \$             | 970.67                  | \$             |         |
| 4. LESS PAYROLD a. Payroll taxes a b. Insurance c. Union dues d. Other (specify) | nd Social Securi    |   |               | \$<br>\$<br>\$ | 185.34                  | \$             |         |
|  |                     |   |               | \$             |                         | \$             |         |
| 5. SUBTOTAL O  |                     |   |               | \$             | 185.34                  |                |         |
| 6. TOTAL NET M   | IONTHLY TA          | KE HOME PAY   |               | \$             | 785.33                  | <u>\$</u>      |         |
| 8. Income from rea 9. Interest and divide  | l property<br>lends | of business or profession or farm (attach details   |               | \$<br>\$<br>\$ |                         | \$<br>\$<br>\$ |         |
| that of dependents 11. Social Security   | listed above        |   | or s use or   | \$             |                         | \$             |         |
| (Specify)  |                     |   |               | \$             |                         | \$             |         |
| 12. Pension or retir   |                     |   |               | \$             |                         | \$<br>\$       |         |
| (Specify)  |                     |   |               | \$             |                         | \$             |         |
|  |                     |   |               | \$             |                         | \$             |         |
| 14. SUBTOTAL C   | F LINES 7 TH        | IROUGH 13   |               | \$             |                         | \$             |         |
| 15. AVERAGE M  | ONTHLY INC          | COME (Add amounts shown on lines 6 and 14)  | )             | \$             | 785.33                  | \$             |         |
|  |                     | <b>ONTHLY INCOME</b> : (Combine column totals tal reported on line 15)                        | from line 15; |                | \$                      | 785.3          | <u></u> |

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document: None

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IN RE Phillips, Jessica

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Debtor(s)

## SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

| Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorat quarterly, semi-annually, or annually to show monthly rate. | e any payments   | made biweekly |
|---|------------------|---------------|
| Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete expenditures labeled "Spouse."   | e a separate     | schedule of   |
| <ol> <li>Rent or home mortgage payment (include lot rented for mobile home)</li> <li>a. Are real estate taxes included? Yes No _√_</li> </ol>   | \$               | 350.00        |
| b. Is property insurance included? Yes No   |                  |               |
| 2. Utilities:   | \$               |               |
| a. Electricity and heating fuel     b. Water and sewer  | φ                |               |
| c. Telephone  | \$ ——            |               |
| d. Other Cell Phone   | \$               | 20.00         |
|   | \$               |               |
| 3. Home maintenance (repairs and upkeep)  | \$               |               |
| 4. Food   | \$               | 300.00        |
| 5. Clothing   | \$               | 25.00         |
| 6. Laundry and dry cleaning   | \$               |               |
| 7. Medical and dental expenses  | \$               | 50.00         |
| 8. Transportation (not including car payments)  | \$               | 75.00         |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc. 10. Charitable contributions  | \$<br>\$         |               |
| 11. Insurance (not deducted from wages or included in home mortgage payments)   | Φ                |               |
| a. Homeowner's or renter's  | \$               |               |
| b. Life   | \$               |               |
| c. Health   |                  |               |
| d. Auto   |                  |               |
| e. Other  | \$               |               |
|   | \$               |               |
| 12. Taxes (not deducted from wages or included in home mortgage payments)   |                  |               |
| (Specify)   | \$               |               |
| 13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)   | — <sub>2</sub> — |               |
| a. Auto   | \$               |               |
| b. Other  | φ ——<br>\$       |               |
| b. Other  | — \$ —           |               |
| 14. Alimony, maintenance, and support paid to others  | \$               |               |
| 15. Payments for support of additional dependents not living at your home   | \$               |               |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement)  | \$               |               |
| 17. Other   | \$               |               |
|   | \$               |               |
|   | \$               |               |
| 10 AVDD A CIE MONITHI V DVDDNGEG (E. 11' - 1.17' D 1 - G  |                  |               |
| <b>18. AVERAGE MONTHLY EXPENSES</b> (Total lines 1-17. Report also on Summary of Schedules and, if  | ¢                | 820.00        |
| applicable, on the Statistical Summary of Certain Liabilities and Related Data.   | <u> э</u> —      | 820.00        |
| 19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of Debtor stays with her parents who pay some household expenses.                           | of this docur    | ment:         |
| 20. STATEMENT OF MONTHLY NET INCOME   |                  |               |
| a. Average monthly income from Line 15 of Schedule I  | \$               | 785.33        |
| b. Average monthly expenses from Line 18 above  | \$               | 820.00        |
| c. Monthly net income (a. minus b.)   | \$ _             | -34.67        |

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Debtor(s)

## DECLARATION CONCERNING DEBTOR'S SCHEDULES

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_\_24 sheets (total shown on

| Date: <b>July 11, 2007</b>   | Signature: /s/ Jessica Phillips  Jessica Phillips  | Debte   |
|--|--|---|
| Date:  | Signature:   |   |
|  |  | (Joint Debtor, if any [If joint case, both spouses must sign.                           |
| DECLARATION AND  | SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION F  | PREPARER (See 11 U.S.C. § 110)  |
| compensation and have provided th<br>and 342 (b); and, (3) if rules or gu  | that: (1) I am a bankruptcy petition preparer as defined in 11 U.S. e debtor with a copy of this document and the notices and information delines have been promulgated pursuant to 11 U.S.C. § 110(h) settie given the debtor notice of the maximum amount before preparing an by that section. | n required under 11 U.S.C. §§ 110(b), 110(h) ng a maximum fee for services chargeable b |
| Printed or Typed Name and Title, if any,   | of Bankruptcy Petition Preparer So   | ocial Security No. (Required by 11 U.S.C. § 110.)                                       |
| If the bankruptcy petition preparer responsible person, or partner who   | is not an individual, state the name, title (if any), address, and so signs the document.  | cial security number of the officer, principal  |
| Address  |  |   |
| Signature of Bankruptcy Petition Prepare   | r Da   | ate   |
| Names and Social Security numbers is not an individual:  | of all other individuals who prepared or assisted in preparing this doc  | ument, unless the bankruptcy petition prepare   |
| If more than one person prepared the   | is document, attach additional signed sheets conforming to the appro   | opriate Official Form for each person.  |
| A bankruptcy petition preparer's fa imprisonment or both. 11 U.S.C. §  | lure to comply with the provision of title 11 and the Federal Rules of 110; 18 U.S.C. § 156.   | f Bankruptcy Procedure may result in fines o  |
| DECLARATION U  | NDER PENALTY OF PERJURY ON BEHALF OF CORPOR  | RATION OR PARTNERSHIP   |
| I, the   | (the president or other officer or a   | n authorized agent of the corporation or  |
| member or an authorized agent of (corporation or partnership) nan schedules, consisting ofknowledge, information, and be | ned as debtor in this case, declare under penalty of perjury that sheets (total shown on summary page plus 1), and that the  | at I have read the foregoing summary an<br>ey are true and correct to the best of m     |
| Date:  | Signature:   |   |
|  |  |   |

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.] Penalty for making a false statement or concealing property. Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571. Case 07-12384 Official Form 7 (04/07)

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Northern District of Illinois

| IN RE:            | Case No   |
|-------------------|-----------|
| Phillips, Jessica | Chapter 7 |
| Debtor            | <u> </u>  |

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. Do not include the name or address of a minor child in this statement. Indicate payments, transfers and the like to minor children by stating "a minor child." See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 -25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

#### 1. Income from employment or operation of business

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

8,000.00 Estimated 2005 income from employment

8,977.00 Estimated 2006 income from employment

4,480.00 Estimated 2007 income from employment year to date

#### 2. Income other than from employment or operation of business

None State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 3. Payments to creditors

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

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|-------|--|--|--|--|--|
| None  | b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within <b>90 days</b> immediately preceding the commencement of the case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$5,475. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)      |  |  |  |  |
| None  | c. All debtors: List all payments made within <b>one year</b> immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)   |  |  |  |  |
| 4. Su | its and administrative proceedings, executions, garnishments and attachments   |  |  |  |  |
| None  | a. List all suits and administrative proceedings to which the debtor is or was a party within <b>one year</b> immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)   |  |  |  |  |
| None  | b. Describe all property that has been attached, garnished or seized under any legal or equitable process within <b>one year</b> immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)   |  |  |  |  |
| 5. Re | possessions, foreclosures and returns  |  |  |  |  |
| None  | List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within <b>one year</b> immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)   |  |  |  |  |
| 6. As | signments and receiverships  |  |  |  |  |
| None  | a. Describe any assignment of property for the benefit of creditors made within <b>120 days</b> immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and joint petition is not filed.)   |  |  |  |  |
| None  | b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within <b>one year</b> immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)  |  |  |  |  |
| 7. Gi | fts  |  |  |  |  |
| None  | List all gifts or charitable contributions made within <b>one year</b> immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.) |  |  |  |  |
| 8. Lo | sses   |  |  |  |  |
| None  | List all losses from fire, theft, other casualty or gambling within <b>one year</b> immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)  |  |  |  |  |
| 9. Pa | yments related to debt counseling or bankruptcy  |  |  |  |  |
| None  | List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under bankruptcy law or preparation of a petition in bankruptcy within <b>one year</b> immediately preceding the commencement   |  |  |  |  |

of this case.

NAME AND ADDRESS OF PAYEE **Gleason And Gleason LLC** 77 W Washington, Ste 1218 Chicago, IL 60602

DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR 4/28/2007

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

301.00

#### 10. Other transfers

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None a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

#### 11. Closed financial accounts

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 12. Safe deposit boxes

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 13. Setoffs

None List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 14. Property held for another person

List all property owned by another person that the debtor holds or controls.



#### 15. Prior address of debtor

If debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

#### 16. Spouses and Former Spouses

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

#### 17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

 $\checkmark$ 

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

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#### 18. Nature, location and name of business

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.



[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Date: <b>July 11, 2007</b> | Signature /s/ Jessica Phillips of Debtor | Jessica Phillips |
|----------------------------|--|------------------|
| Date:                      | Signature of Joint Debtor (if any)       |                  |
|                            | <b>0</b> continuation pages attached     |                  |

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.

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**Northern District of Illinois** 

| IN RE:  |   |  | Case No.   |  |   |  |
|---|---|--|--|--|---|--|
| Phillips, Jessica   | a   |  | Chapter 7  | •  |   |  |
|   | Debtor(s)   |  |  |  |   |  |
|   | <b>CHAPTER 7 INDIVI</b>   | OUAL DEBTOR'S STATE  | EMENT OF INTEN   | TION                                     |   |  |
| I have filed a so   | chedule of assets and liabilities which<br>chedule of executory contracts and und<br>the following with respect to the proper   | expired leases which includes pers   | sonal property subject to  |  | red lease.                                    | Debt will be   |
| Description of Secured Prop   | perty Credito   | or's Name  | Property will<br>be Surrendered  | Property is<br>claimed as<br>exempt      | be redeemed<br>pursuant to 11<br>U.S.C. § 722 | reaffirmed   |
| None  |   |  |  |  |   |  |
| Description of Leased Prop  | erty  | Lessor's Name  |  |  |   | Lease will be<br>assumed<br>pursuant to 11<br>U.S.C. §<br>362(h)(1)(A) |
|   |   |  |  |  |   |  |
| 07/11/2007  | /s/ Jessica Phillips  |  |  |  |   |  |
| Date  | Jessica Phillips  | Debtor   |  | Joi                                      | nt Debtor (i                                  | f applicable)  |
| I declare under percompensation and and 342 (b); and, bankruptcy petition | enalty of perjury that: (1) I am a ban<br>have provided the debtor with a copy<br>(3) if rules or guidelines have been pr<br>n preparers, I have given the debtor no<br>ebtor, as required by that section. | akruptcy petition preparer as defi<br>of this document and the notices a<br>comulgated pursuant to 11 U.S.C. | ned in 11 U.S.C. § 110<br>and information required<br>§ 110(h) setting a maxin | ; (2) I prej<br>under 11 U<br>mum fee fo | pared this d<br>J.S.C. §§ 11<br>or services c | ocument for 0(b), 110(h), hargeable by                                 |
| If the bankruptcy   | me and Title, if any, of Bankruptcy Petition petition preparer is not an individuan, or partner who signs the document.   | _  | Social Security ddress, and social securi                                      | _  | -   |  |
| Address   |   |  |  |  |   |  |
| Signature of Bankrup  | otcy Petition Preparer  |  | Date   |  |   |  |
| Names and Social is not an individua                                      | Security numbers of all other individua   | als who prepared or assisted in prep   | paring this document, unl  | ess the ban                              | kruntov neti                                  | .•   |

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or

**CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION** 

imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

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Joint Debtor

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| IN RE:                        |   | Case No.  |
|-------------------------------|---|---|
| Phillips, Jessica             |   | Chapter 7   |
|                               | Debtor(s)                                   | · -   |
|                               | VERIFICATION OF CREDI                       | TTOR MATRIX   |
|                               |   | Number of Creditors                                   |
| The above-named Debtor(s) her | reby verifies that the list of creditors is | s true and correct to the best of my (our) knowledge. |
| Date: <b>July 11, 2007</b>    | /s/ Jessica Phillips                        |   |
|                               | Debtor                                      |   |
|                               |   |   |
|                               |   |   |

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Phillips, Jessica 1515 N Silver Lane #2b Palatine, IL 60074 Document Page 40 of 42 At&T Broadband PO Box 173885 Denver, CO 80217-3885

Continetal Finance Company PO Box 30034 Tampa, FL 33630-3034

Gleason And Gleason LLC 77 W Washington, Ste 1218 Chicago, IL 60602 Bankcard Services PO Box 4499 Beaverton, OR 97076-4499 Credit Management Control 2707 Rapids Dr Racine, WI 53404-1743

Aams Llc 4800 Mills Civic Pkwy West Des Moines, IA 50265-5263 Carol Stream Fire Protection PO Box 457 Wheeling, IL 60090-0457 Credit Protection Assoc 13355 Noel Rd Ste 2100 Dallas, TX 75240-6837

Acct Rec Svc 3031 N 114th St Milwaukee WI 5322

Milwaukee, WI 53222-4208

Centegra Health 504 Northwest Hwy Cary, IL 60013-2995 Dependon Collection 7627 Lake St Ste 210 River Forest, IL 60305-1878

Acute Care Specialists 701 Winthrop Ave Glendale Heights, IL 60139-1405 Central Dupage Hospital 25 N Winfield Rd Winfield, IL 60190 Dupage County Clerk Tickets 1000 31st St Downers Grove, IL 60515-1214

Afni Inc PO Box 3427 Bloomington, IL 61702-3427 Charter One Bank 1215 Superior Ave E Cleveland, OH 44114-3257 Elmhurst Emergency Medical Center 200 Berteau Ave Elmhurst, IL 60126-2966

Alexian Brothers Hospital 800 Biesterfield Rd Elk Grove Village, IL 60007-3311 Chex Systems 7805 Hudson Rd Ste 100 Saint Paul, MN 55125-1595 Elmhurst Memorial Hospital PO Box 92348 Chicago, IL 60675-2348

Aspire PO Box 105555 Atlanta, GA 30348-5555 Children's Bomc Customer Service Center Camp Hill, PA 17012-0001 Emergency & Ambulatory 33 W Higgins Rd Ste 4040 South Barrington, IL 60010-9355

Asset Acceptance PO Box 2036 Warren, MI 48090-2036 Cingular Wireless 5050 Ash Grove Dr Springfield, IL 62711-6329 Eskanos & Adler 2325 Clayton Rd Concord, CA 94520-2104

At&T PO Box 8212 Aurora, IL 60572-8212 Com Ed Exelon Bankruptcy 2100 Swift Dr Oak Brook, IL 60523-1559 Fingerhut PO Box 1250 Saint Cloud, MN 56395-1250 Case 07-12384 Doc 1 Filed 07/11/07 Entered 07/11/07 16:46:44 Desc Main

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First Bk Of De/contine 1000 Rocky Run Pkwy Wilmington, DE 19803-1455 Document F Kca Financial 628 North St PO Box 53 Geneva, IL 60134-0053

Nco Financial Systems PO Box 13570 Philadelphia, PA 19101-3570

First Nationwide - Delta 3760 Calle Tecate Camarillo, CA 93012-5059 Kohls N56W17000 Ridgewood Dr Menomonee Falls, WI 53051-5660 Nco- MedcIr For Moraine Emergency Physicians PO Box 41448 Philadelphia, PA 19101-1448

Glen Oaks Hospital 121 E Roosevelt Rd Lombard, IL 60148-4561 Malcom S Gerald And Associates, Inc. 332 S Michigan Ave Ste 600 Chicago, IL 60604-4434

Nco-marlin For International Check Service PO Box 8529 Philadelphia, PA 19101-8529

Glenside Public Library 25 E Fullerton Ave Glendale Heights, IL 60139-2688 Mazda Amer PO Box 680020/200 A Franklin, TN 37068 Northwest Collectors For Physician Anesthesia Associates 3601 Algonquin Rd Ste 23 Rolling Meadows, IL 60008-3126

Harvard Collection For Elk Grove Lab Physicians 4839 N Elston Ave Chicago, IL 60630-2534 MEA Elk Grove LLC PO Box 366 Hinsdale, IL 60522-0366 Northwest Community Hospital 800 W Central Rd Palatine, IL 60055-0001

Harvard Collection Services 4839 N Elston Ave Chicago, IL 60630-2534 Medical Collection Systems 725 S Wells St Ste 700 Chicago, IL 60607-4578 Northwest Radiology Associates 880 W Central Rd Arlington Heights, IL 60005-2355

Heller & Frisone 33 N Lasalle St Ste 1200 Chicago, IL 60602-3415

Medshld Corp PO Box 26390 Columbus, OH 43226-0390 PAY PAL PO Box 45950 Omaha, NE 68145-0950

Hollywood Entertainment Corporation PO Box 6789 Wilsonville, OR 97070-6089

Executive Office 223 W Jackson Blvd, Ste 900 Chicago, IL 60606-6908

Merchant's Credit Guide Co.

Portfolio Recoveries 287 Independence Blvd Virginia Beach, VA 23462-2962

Imagine/fbofd 245 Perimeter Center Pk Atlanta, GA 30346 Midland Credit Management 8875 Aero Dr Ste 200 San Diego, CA 92123-2255 Professional Career Development Institut C/O ER Solutions PO Box 9004 Renton, WA 98057-9004

Jewel Food Stores 250 E Parkcenter Blvd Boise, ID 83706-3940

NCO World Headquarters 507 Prudential Rd Horsham, PA 19044-2308 Rewards 660 PO Box 30490 Tampa, FL 33630-3490 Case 07-12384 Doc 1 Filed 07/11/07 Entered 07/11/07 16:46:44 Desc Main

Rio Resources C/O United Legal Corporation 9000 Regency Square Blvd Ground FI Jacksonville, FL 32211-8115 Document Page 42 of 42 Total Card Inc PO Box 89210 Sioux Falls, SD 57109-9210

RJM ACQ LLC 575 Underhill Blvd Ste 224 Syosset, NY 11791-3416 US Cellular Write Off Team 5117 W Terrace Dr Madison, WI 53718-8344

Rskmgtcora 4450 River Green Pkwy Duluth, GA 30096-2589 Van Ru Credit Corp 10024 Skokie Blvd Ste 2 Skokie, IL 60077-1025

Sallie Mae Servicing 1002 Arthur Dr Lynn Haven, FL 32444-1683 Walgreens 200 Wilmot Rd Deerfield, IL 60015-4620

Sprint Communications Co 6391 Sprint Pkwy Overland Park, KS 66251-6100 West Asset 1000 N Travis St Ste F Sherman, TX 75090-5054

State Collection Service 2509 S Stoughton Rd Madison, WI 53716-3314

Suburban Radiologist 1446 Momentum PI Chicago, IL 60689-5314

Tcf Bank 800 Burr Ridge Pkwy Burr Ridge, IL 60527-6486

Tci 2104 W 41st St Ste 34 Sioux Falls, SD 57105-6116

Telecheck 5251 Westheimer Rd Houston, TX 77056-5412